FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

`12FE4M5`

Fitzgerald for US Senate

ADDRESS (number and street) ▼

910 Sunset Lane

☐ Check if different than previously reported. (ACC)

Horicon   **WI**   **53032** -

CITY ▲   STATE ▲   ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C `C00503227`

3. IS THIS REPORT   ☒ NEW (N)   **OR**   ☐ AMENDED (A)

STATE ▼ DISTRICT

WI   **00**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)

☒ July 15 Quarterly Report (Q2)

☐ October 15 Quarterly Report (Q3)

☐ January 31 Year-End Report (YE)

☐ Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

☐ Primary (12P)   General (12G)   ☐ Runoff (12R)

☐ Convention (12C)   ☐ Special (12S)

Election on [M M] / [D D] / [Y Y Y Y]   in the State of ☐

(c) 30-Day **POST**-Election Report for the:

☐ General (30G)   ☐ Runoff (30R)   Special (30S)

Election on [M M] / [D D] / [Y Y Y Y]   in the State of ☐

5. Covering Period **04** / **01** / **2014**   through   **06** / **30** / **2014**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer   Andrea Fitzgerald

Signature of Treasurer _____

Date **07** / **11** / **2014**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

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